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Effectiv	Application Nur	Complete if Known Application Number 09/894,642-Conf. #1958				
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Application Number		June 27, 2001	
FEE TRANSMITTAL			Filing Date First Named Inve		Kenneth H. Abbott	
For FY 2009			Examiner Name	The Harrist Hyoria		
Applicant claims smal		Art Unit 2444				
TOTAL AMOUNT OF PAYMENT (\$) 180.00		Attorney Docket		M1103.70784US0	00	
			rittorno, 5 co	1.		
METHOD OF PAYMENT (check all that apply)						
Check x Credit Card Money Order Other (please identify):						
Deposit Account Deposit Account Number: 23/2825 Deposit Account Name: Wolf, Greenfield & Sacks, P.C.						
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)						
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee						
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17						
FEE CALCULATION						
1. BASIC FILING, SEARCH, AND EXAMINATION FEES						
	FILIN	NG FEES SE Small Entity	EARCH FEES Small Entity		IATION FEES Small Entity	
Application Type	Fee (\$)	Fee (\$) Fee (Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	330	165 540		220	110 _	
Design	220	110 100		140	70 _	
Plant	220	110 330		170	85	
Reissue	330	165 540		650	325 _	
Provisional	220	110	0 0	0	0 _	
2. EXCESS CLAIM FEES					Fee (\$)	Small Entity Fee (\$)
Fee Description Each claim over 20 (inclu	ding Reissue	,a)			<u>Fee (\$1</u> 52	26
Each independent claim o	-				220	110
Multiple dependent claims		mg remain,			390	195
	extra Claims	Fee (\$)	Fee Paid (\$)	Fee Paid (\$) Multiple Dependent Claims		
- or HP =		x =		<u>F</u> e	ee (\$) <u>Fe</u> e	e Paid (\$)
HP = highest number of total c	claims paid for, if	f greater than 20.				
	Extra Claims		Fee Paid (\$)			
- or HP = X = HP = highest number of independent claims paid for, if greater than 3.						
3. APPLICATION SIZE FE	EE .		1 1 1 = alasi	• -11 ₌₁ £	1	-4 <u></u>
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50						
sheets or fraction the	reof See 35	U.S.C. 41(a)(1)(G) an	nd 37 CFR 1.16(s).	١.		
	Extra Sheets	Number of each	h additional 50 or fra			Fee Paid (\$)
4. OTHER FEE(S)		. /50 =	(louis ap	, 1010	^	Fees Paid (\$)
Non-English Specifica	ation. \$130;	Re (no small entity di	iscount)			
Other (e.g., late filing				Disclosure	Statement	180.00
SUBMITTED BY	- 1					
Signature			Registration No. (Attorney/Agent)	32,950	Telephone	617.646.8000
Name (Print/Type) Edmund	d I (Malsh		(Marine Jr. 1801)		pate////	11/1/1/2011
Traine (Finite 1990) Edition of the state of						
				4 6		
I hereby certify that this pap	per (along with	Certificate of Electr any paper referred to as	ronic Filing Under 3. being attached or end	7 CFR 1.8 closed) is bei	ng transmitted via the	Office electronic filing
system in accordance with			M		10.	
Dated: 3-/7-//	<i>'</i>	Signature	e: //legrore	E A	Sera ()